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FORM TO BE USED BY PRISONERS IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983
IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF MISSISSIPPI

WCCF-18-109 ARP# COMPLAINT	
(Last Name) (Identification Number) Scott L1786 (First Name) (Middle Name) APR 30 2018	
WCCF P.O. BOX 1889 Woodville, MS 39669 ARTHUR JOHNSTON [Address] (Enter above the full name of the plaintly, prisoner, and address plaintly into action)	
Management Training CIVIL ACTION NUMBER: 5:18044-0001 (to be completed by the Court)	1
Corporation WCCF P.O.	
Box 1889 Woodville, MS 39669-WCC F-Medical	
(Enter above the full name of the defendant or defendants in this action) OTHER LAWSUITS FILED BY PLAINTIFF	
NOTICE AND WARNING: The plaintiff must fully complete the following questions. Failure to do so may result in your case being dismissed.	
A. Have you ever filed any other lawsuits in a court of the United States? Yes () No (1
If your answer to A is yes, complete the following information for each and every civil action and appeal filed by you. (If the is more than one action, complete the following information for the additional actions on the reverse side of this page additional sheets of paper.)	re
1. Parties to the action: V/A	
	_
2. Court (if federal court, name the district; if state court, name the county):	_
3. Docket Number: N/A	_
4. Name of judge to whom case was assigned:	
5. Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it st pending?):	till

PARTIES

(In item I below, place your name and prisoner nur for additional plaintiff, if any).	ober in the first blank and place your present address in the second blank. Do the same
I. Name of plaintiff: Janicholas V. So	eott Prisoner Number: L1786
Address: P.O. BOX 1889 Wood	
Wilkinson County C	
defendants.)	endant in the first blank, his official position in the second blank, and his place of low item. II for the names, positions, and places of employment of any additional
II. Defendant: <u>Management In</u> <u>Warden</u>	rining Consoration 40 Jody Bradley is employed as
	al Facility P.O. Box 1889 Woodville, MS 39669
The plaintiff-is responsible for providing the cour of each defendant(s). Therefore, the plaintiff is a	Libensme and address of each plaintiff(s) as well as the name(s) and address(ss)
PLAINTIFF:	
NAME: ADDR	P.O. Box 1889 Woodville, MS 39669
Janicholas V. Scott # L1786	P.O. Box 1889 Woodville, MS 39669
DEFENDANT(S):	
NAME: Officer Jackson ADDR	ESS: WCCF P.O. Box 1889 Woodville, MS 39669
Officer Fleming	WCCF P.O. Box 1889 Woodville, MS 39669
Officer Grinnell	WCCF P.O. Box 1889 Woodville, MS 39669
Officer Wembley	WCCF P.O. Box 1889 Woodville, MS 39669
ccf-medical % Dr. Burke	WCCF P.O. Box 1889 Woodville, MS 39669

GENERAL INFORMATION

Α.	Atth	e time of the incident complained of in this complaint, were you incarcerated because you had been convicted of a crime?
	Yes (✓) No()
В.	Аге у	ou presently incarcerated for a parole or probation violation?
	Yes (✓) No()
c.	At the	time of the incident complained of in this complaint, were you an inmate of the Mississippi Department of Corrections C)?
	Yes (/) No()
D.	Are yo	ou currently an inmate of the Mississippi Department of Corrections (MDOC)?
	Yes (/) No()
E.	Yes (No (), if so, state the results of the procedure: I given an apology from D Ke regarding the major delay in medical as well as the
F.	IIIC	onvenient 955 stance in 9dministration. are not an inmate of the Mississippi Department of Corrections, answer the following questions:
	1.	Did you present the facts relating to your complaint to the administrative or grievance procedure in your institution?
		Yes() No()
	2.	State how your claims were presented (written request, verbal request, request for forms):
	•	
	3.	State the date your claims were presented:
	4.	State the result of the procedure:

STATEMENT OF CLAIM

III. State here as briefly as possible the facts of your case. Describe how each defendant is involved. Also, include the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of different claims, number and set forth each claim in a separate paragraph. (Use as much space as you need; attach extra sheet if necessary.)

I had become Severly ill due to being heavily exposed to Black Mold for an extensive amount of time (82) days. I repeatedly requested to be removed from cell 208 for atleast 2 consecutive weeks starting from the very first day I was assigned to cell 208. I was also repeatedly neglected and overlooked. Officer Jackson, Grinnell, Wimbley and Fleming were very well aware of me being confined under this health hazardous condition but fail to remedy the Situation by not removing me from cell 208, as I repeatedly requested. Also, after I submitted multiple request forms (3 requests). It was 17 days after submitting my 3rd request before I was over seen by a doctor! I have suffered Severly with illnesses, anxiety, and stress due to being forcefully confined to a health hazardous housing as well as being under a major delay to receive medical treatment! To this day I still have shortness of breathing. RELIEF

witted multiple request forms (3 requests). It was 17 days after submitting my request before I was ever seen by a doctor! I have suffered severly with ses, anxiety, and stress due to being forcefully confined to a health hazards mg as well as being under a major delay to receive medical treatment! To this still have shortness of breathing. RELIEF

IV. State what relief you seek from the court. Make no legal arguments. Cite no cases or statutes.

Plaintiff now seeks money damages for negligence on behalf of the was well being of his health as well as inconvenience on behalf of a major delay to recieve medical treatment! I have suffered on behalf of being under these critical circumstances!

Signed this 21 day of April 20 18

Janichulas Seett # L1786

WCC P.O. Box 1887 Woodvilleims 39668

Signature of plaintiff. prisoner number and address of plaintiff

I declare under pensity of perjury that the foregoing is true and correct.

April 21, 2018

Signature of plaintiff

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misoner amniber and address of

I, Janicholas V. Scott # L1786 has been conducting an investigation on conditions of confinement against MTC. I have security related documents as well as notarized Complaints on Standards and policies that this administration has violated upon their own guidelines, policies, and rules. Administrative officials have fail to remedy certain situations on conditions of confinements of Wrongful acts that they have common knowlege of. Wrongful acts are repeatedly being held on behalf of security measures and administrative faults, I have records of dates of specific incidents, conditions, procedures, policies and events dating from months ago dealing with this investigation of this particular case. Staff has came into direct Contact with certain wrong doings and have failed to remedy the Situations numerous times. LEGAL I have become a victim of q Serious physical injury as well as suffered with a health hazardous illness under the circumstances of wrong doings!

Certificate of Service

State of Mississippi County of Wilkinson

Personally appeared before me, the undersigned authority in and for said jurisdiction, the within named petitioner, who after being first duly sworn by me, stated under oath that the statements set forth in the above and foregoing are true and correct as herein stated.

Sworn and subscribed before me this the 13 day of April 2018

Janichelos V. SENTARY EATLIN ROSENTARY EATLIN

Rosemary Halling NOTARY PUBLIC

MISSISSIPPI DEPARTMENT OF CORRECTIONS Administrative Remedy Program

WCCF-18-109

SECOND STEP RESPONSE FORM

You must respond to the inmate within 45 days of receipt of the appeal of the First Step Response.

Inmate's Name & #: Janicholas Scott #L1786

Location: Wilkinson County Correctional Facility

From: **Dr. Burke** Title: **Doctor**

I APPEARS THAT YOU WERE THEATER APPOINTERY
WHEN ZEEN,

Signature

The above named inmate has fulfilled the requirements of the Administrative Remedy Program at WCCF under extraordinary circumstances and is eligible to seek judicial review in state or federal court within 30 days of receipt of the Second Step Response. Financial responsibility for such filing rests with the inmate.

Inmate's Signature

DOC #

Date

The reason I hold medical responsible for the delay is because 16f the 3 medical request forms which I submitted was given directly to a nurse on medical Staff. As I said in my complaint, it was 17 days after I submitted my third request before I was ever seen, Therefore, medical was given direct notice of the medical requests. The other two (2) requests were given to an officer directly also. Medical staff has as much common Knowlege as the officers did about me requesting to be seen. Also, to be specific, I gave the nurse the medical request on the second request Of the three that I Submitted! So to be realistic it was actually over 17 days that the medical staff had me under delay! They are responsible for delay. MTC officials are responsible for the negligence of the well being of my health by not removing me from the health hazardous living quarters. as I repeatedly requested. I became severly ill on behalf of the condition in the situation. Medical is at as much fault as the administrative staff on behalf of me being under major delay!

Janichles Scath L1786 7 # 21786 Page 8 of 11 PAGE I

I arrived at Wilkinson County Correctional Facility to be housed on Dec. 4, 2017. After I was booked in and completed the intake procedure I was assigned to Whiskey Pod Cell 208, After I entered the cell I immediately discovered that the housing unit was in horrible living conditions as well as hazardous health and safety confinement. I immediately discovered that the sink leaks when used, the toilet leaks when flushed, the Ceiling leaks when it rains. I also found my rack, which I am assigned to sleep on had been cut with a very sharp object of some type. There was a large section cut out of my bedding rack. About 30% (percent) of my bed was cut out! The cut out section of the rack appeared to be very sharp and deep! I also found the cell to be heavily contaminated due to a massive amount of black mold being covered throughout the walls and ceiling of the cell! After I discovered all of these horrible living conditions of confinement, I immediately addressed these issues to these administrative officials here at this facility and I requested to be removed from this type of enviornment. I continued to address these issues and complaints for atleast 2 consecutive weeks. I also requested to be removed from this housing unit for atleast 2 consecutive weeks as wellim I was continued to be neglected, overlooked, denied and refused the well being of my health and safety. After being housed under these conditions for an extensive period of time. I became very sick and ill. I began to suffer with a sore throat and tonsils as well as a congestion of the lungs, which caused to have an effect on my breathing. I soon found out that this was caused due to being heavily exposed to the Black mold. I became exposed by having to sleep with large black mold spots on the wall right next to where I lay my head, also by patching the ceilings with paper

to try and help: 18 president MTPh & Order of 1904 & Ksage from coming inside the cell. When this was done I had to apply my hands in the mold! This act continued repeatedly until January 18, 2018. On this date there was a cell inspection held by Officer Jackson. As she monitored and inspected cell 208, I addressed to her what I had been addressing to this administrative staff since I first was assigned to cell 208. Which was the living conditions and being removed from the cell. She observed all complaints and conditions and took very little or no care in assisting me in the complaints I was addressing. I also showed her where I had been cut on my back from the rack when I attempted to jump or slide down from the rack. After I was neglected on January 18, 2018 I immediately addressed this complaint to American Civil Liberties Union of Mississippi. I explained to them in my complaint the living conditions which I am being forcefully housed, the negligence of my health and safety, as well as my physical injury and illness I have suffered due to being neglected of my health and safety. I recieved response from ACLU on January 24, 2018. I was declined legal assistance from ACLU but I was reccomended to several other legal Services. I was in cell 208 from December 7,2018 until February 25, 2018, After I was assaulted by my cellmate the night of February 25, 2018 I rapidly kicked the door so that the officers would relieve me from danger. My cellmate was armed with a knife. I informed the officers of this incident and they took very little care of relieving me from danger! They began to try to force me to go back into the cell with this inmate but I refused to do so. But anyways, taking a few days back, I was finally called to be seen by a doctor on February 19, 2018. I put in multiple requests before I was ever seen (3 requests). It took 17 days after my laste request before I was called to medical. I was treated with Loratadine 10 mg. tablets, Guaifensin 200 mg. tablets and cough drops

for my illness. I was declined treatment for my cut on my back because I had been self treating the cut with triple antibiotic ointment. On February 25, 2018 between 6:00 and 6:45 p.m. Shortly after breakfast, I was confronted, assaulted and threatened by 3 inmates. They told me if I was to make any complaint or report or notify the officers about the rack in cell 208 being cut they Would kill me! One inmate took my ID and took a picture of it With his cellphone. The inmates were unaware that I had already address these complaints thru ARP. The inmates were making knives from the bedding rack and the officers have common knowlege of the bed being cut! On March 15, 2018 CID from MDO did an inspection. She became aware of many problems that are ongoing here at this facility. On Thursday March 22, 2018 between 5:00 and 6:00 in the morning right before breakfastime, There Were atleast 35-40 officers here at Wilkinson County Correctional Facility. When they came in and performed there procedure they confiscated weapons and cell phones. They also informed the officers that they should have fixed the bedding rack or replaced it. The officers have common knowlege of the rack but still fail to remedy the situation! On April 11, 2018 at 10:45 p.m. maintenance was on W-pod they again went into cell 208 and saw the rack being cut and refuse to address the issue! Surveillance footage will prove of all this dealing with conditions, procedures, incidents, standards and policies. This condition is still ongoing to this date. These records were kept by me during my investigation dealing with several complaints that I have addressed on behalf of wrong doings of this administration.

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This report of complaints is to inform this court that there will be multiple complaints that I, Janicholas Vankeith Scott will address to this court. I have become a victim of serious physical injury as well as suffering with a severe illness under the circumstances of wrong doings!

Certificate of Service

State of Mississippi County of Wilkinson

Personally appeared before me, the undersigned authority in and for said jurisdiction, the within named petitioner, who after being first equal duly sworn by me, stated under oath that the statements set forth in the above and foregoing are true and correct as therein stated,

Sworn and subscribed before me this the 26 day of

Janisha Scott



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